PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

10081579

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	10	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	10 minus 20=	* 0
INDEPENDENT CLAIMS	10 minus 3 =	* 7
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

SMALL ENTITY OR **OTHER THAN SMALL ENTITY**

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ 9=		OR	X$18=	
Independent	*	Minus	***	=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ 9=		OR	X$18=	
Independent	*	Minus	***	=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ 9=		OR	X$18=	
Independent	*	Minus	***	=·	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

NOTICE OF PARTIAL FEE / FEE DUE

Date: _03- 15-0 2_

To: _____

From: RAM Team, Office of Initial Patent Examination,

Subject: Fee Due

Application Number _12081579_

The attached document was submitted with an insufficient fee. The Office of Initial Patent Examination has posted the fee submitted to the suspended fee code, 197. Please check the application for the appropriate authorization to charge a deposit account. If present, delivery a copy of the authorization, this form and the applicants submission to the Office of Initial Patent Examination, RAM Team, CP2-6C12. If an authorization is not present, notify the applicant of the fee deficiency.

The correct fee, code: _202_   amount $ _294_

The suspended fee code: 197   amount   - $ _____

Fee due   amount   = $ _294.00_

It is the Group's responsibility to collect the balance of the fee due and ensure that the total fee is posted to the correct fee code upon receipt of the balance due before providing the requested service.

Please direct any questions you may have to Joyce Gunter-Warren at 308-3616.

Signature

FORM OIPE-RAM-02 (Rev. 5/97)